Adulterated food items

1579. SHRI S.S. AHLUWALIA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government has been seized of the growing campaign especially in the electronic media about large production of adulterated milk, ghee and other food items endangering human health in blatant violation of the food safety norms stipulated in the Prevention of Food Adulteration Act, 1954;

(b) if so, whether Government has initiated any steps primarily to ascertain veracity of these campaigns and for enforcement of the law in bonafide cases, during the last two years; and

(c) the status of steps envisaged in the Food Safety and Standards Act, 2006 (34 of 2006) for enforcement of its provisions?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) Yes. Government is aware of the reports about production of adulterated milk, ghee and other food items in different parts of the country.

(b) In order to keep a check on adulteration in milk, the Food (Health) Authorities of the States/U.Ts have been advised from time to time to keep a strict vigil by drawing samples regularly especially of dairy products from all sources viz Manufacturers, Wholesalers and Retailers and to take strict action against the offenders under the provisions of the PFA Act, 1954. 41 State Food Laboratories have been strengthened with manpower, building wherever necessary. State of the art equipment, Orientation Training to Laboratory Staff/Chemists/Public Analyst under the World Bank Assisted Capacity Building project on Food & Drugs for effective implementation of Prevention of Food Adulteration Act, 1954 in the States/U.Ts.

(c) Section 3 to 18, 30, 81-88, 90-93, 99 and 101(a total of 31 out of 101 sections) of the Food Safety and Standards Act, 2006 have been enforced. The Food Safety and Standards Authority of India has already been set up as per the provisions of the said Act. The Staff/Employees of various Departments/Ministries administering various food laws have also been transferred to Food Authority as per the provisons of the said Act.

Medical reimbursement

1580. SHRI DARA SINGH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Central Government Retired Pensioners who are undergoing treatment for cancer in Rajiv Gandhi Cancer Institute and Research Centre, after obtaining required permission from CGHS, are not being paid full reimbursement charges for PET. CT. Scanning expenses incurred by them; and

(b) keeping in view that such scanning is to be done 3 to 4 times for cancer patients, whether Health Minister proposes to prescribe rates for full reimbursement of Rs. 22,000 instead of Rs. 7,500

per scan, in order to give financial relief to the retired pensioners?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) and (b) CGHS can empanel only those private hospitals as are willing to be empanelled and are agreeable to terms and conditions and the package rates that emerge on the basis of tenders floated by CGHS. Private hospitals are required to quote their rates for various procedures. The last tender that was notified in 2004 and revised package rates on the basis of the response to this tender came into effect from 2006-07.

In respect of rates for treatment of cancer, it was found that the rates that emerged from out of the tender process of 2004 were substantially lower than the rates in vogue from 2001-02. Consequently, most cancer hospitals refused to accept the revised rates. In order not to deprive the CGHS beneficiaries the treatment for cancer related illness, it was decided to permit CGHS beneficiaries to get treatment in any hospital providing treatment for cancer and get reimbursement at 2001-02 rates.

When the CGHS initiates action to revise rates for all procedures, it is hoped that a realistic package rate will emerge for cancer treatment.

Strengthening of infrastructure by rural health mission

1581. SHRI PARIMAL NATHWANI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the health care infrastructure in Jharkhand is much below the national average and the requirement of the State;

(b) if so, whether Government is planning to strengthen the existing health care infrastructure and manpower under the National Rural Health Mission;

(c) if so, the details of present status and planning for near future for the State;

(d) what is the amount and percentage allocation of Health and Family Welfare budget for Jharkhand;

(e) how many hospitals, primary health centres are existing and operational in Jharkhand; and

(f) whether they are sufficient to cater to the needs of the existing population?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) A comparative statement showing the National and Jharkhand figures is given in the enclosed Statement (*See* below).

(b) and (c) Yes. Under National Rural Health Mission, funds are released to all State UT Governments including the State of Jharkhand for upgradation of existing health infrastructure and for creating new infrastructure in rural areas. The State Government assess their requirement and reflect the same in the annual Programme Implementation Plan under NRHM. The funds are released to State Governments as per the recommendations of the National Programme Coordination Committee.